SAMENDMENT TRANSMITTAL LETTER				ATTORNEY'S DOCKET NO.: 0045-1		
ERIAL NUMBER:	FILING D.	ATF:	EXAMINER:		GROUP ART	UNIT:
		ry 15, 200		S. Gollamudi	1616	
NVENTION:	PLICATION FO	R TREAT	ING TOENAIL F	ungus	-	CEIVE 3 1 2003
nventor(s): Jan	nes E. Brehove					
	ANT COMMISSIONE vith is an amendment in		ENTS: dentified application. I	he fee has been ca		NTER 1600/2 own below.
		CLA	AIMS AS AMENDED			
(1)	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) NO. OF EXTRA CLAIMS PRESENT	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	16	MINUS	20	0	X \$9	0.00
INDEP. CLAIMS	2	MINUS	3	0	X \$43	0.00
				L ADDITIONAL FE THIS AMENDMEN	1	\$ 0.00
*** If the "Highest N *** If the "Highest No additi Charge \$	Number Previously Paid ional fee is required.	or" IN THIS For" IN THIS	4, write "0" in column 5. SPACE is less than 20, wr S SPACE is less than 3, wr cosit Account No.	ite "3" in this space.		A triplicate
** If the "Highest N *** If the "Highest No additi Charge \$ copy of the thick the	Number Previously Paid F Number Previously Paid F ional fee is required. his sheet is enclosed. ersigned petitions for an	or" IN THIS For" IN THIS to Dep	SPACE is less than 20, wroser is less than 3, wroser Account No. of time for filing this de	ite "3" in this space.	. <i>i</i>	
** If the "Highest N *** If the "Highest No additi Charge \$ copy of the under A A triplica	Number Previously Paid F Number Previously Paid F ional fee is required. his sheet is enclosed. ersigned petitions for an	or" IN THIS For" IN THIS to Dep y extension enclosed.	SPACE is less than 20, wrose SPACE is less than 3, wrose that Account No. of time for filing this do to cover the fee is	ite "3" in this space.	. <i>i</i>	
** If the "Highest N *** If the "Highest No additi Charge \$ copy of the under A A triplica	Number Previously Paid F Number Previously Paid F Number Previously Paid ional fee is required. his sheet is enclosed. ersigned petitions for an A check for \$ ate copy of this sheet is	to Dep ty extension enclosed.	SPACE is less than 20, wrose SPACE is less than 3, wrose that Account No. of time for filing this do to cover the fee is	ite "3" in this space.	. <i>i</i>	
*** If the "Highest N *** If the "Highest No additi Charge \$ copy of the Copy	Number Previously Paid F Number Previously Paid F Number Previously Paid ional fee is required. his sheet is enclosed. ersigned petitions for an A check for \$	to Dep ty extension enclosed.	SPACE is less than 20, wrose SPACE is less than 3, wrose that Account No. of time for filing this do to cover the fee is	ocument required u submitted herewit	nder 37 C.F.F.h.	
** If the "Highest N *** If the "Highest No additi Charge \$ copy of the under A A triplica	Number Previously Paid F Number Previously Paid F Number Previously Paid ional fee is required. his sheet is enclosed. ersigned petitions for an A check for \$	to Dep to Dep enclosed. eposit Accou	SPACE is less than 20, wrose SPACE is less than 3, wrose that Account No. of time for filing this do to cover the fee is	ocument required u submitted herewit Signature Ernest D. E	nder 37 C.F.F.h.	
*** If the "Highest N *** If the "Highest N *** If the "Highest N Charge \$ copy of the Charge and C	Number Previously Paid F Number Previously Paid F Number Previously Paid ional fee is required. his sheet is enclosed. ersigned petitions for an A check for \$ ate copy of this sheet is ny additional fees to De December 22, 20 Date (973) 644-000 Phone at this correspondence	to Dep to Dep y extension enclosed. eposit Accou	SPACE is less than 20, wrose SPACE is less than 3, wrose that Account No. of time for filing this do to cover the fee is	Signature Ernest D. E Attorney Name 25,833 Reg. Number tates Postal Service (Signature)	as first classember 22, 2003	R. 1.136.
*** If the "Highest N *** If the "Highest N *** If the "Highest N Charge \$ copy of the Charge and C	Number Previously Paid F Number Previously Paid F Number Previously Paid ional fee is required. his sheet is enclosed. ersigned petitions for an A check for \$ ate copy of this sheet is ny additional fees to De December 22, 20 Date (973) 644-000 Phone at this correspondence	to Dep to Dep y extension enclosed. eposit Accou	SPACE is less than 20, wross SPACE is less than 3, wross t	ocument required usubmitted herewith Signature Ernest D. E Attorney Name 25,833 Reg. Number	ander 37 C.F.F. Buff Buff Buff Buff rd	R. 1.136.